

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO. 10 827000  
APPLICANT(S)

FILING DATE 04-19-04

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1		1			
2		1				
3		1				
4		1				
5		1				
6		2				
7						
8						
9				1		
10		2				
11						
12						
13						
14	1		1			
15				1		
16				1		
17				1		
18				1		
19				1		
20				1		
21				1		
22				1		
23				1		
24				1		
25				1		
26	1		1			
27		1		1		
28		2		2		
29		3		2		
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50						
TOTAL IND.	1		3			
TOTAL DEP.		17		17		
TOTAL CLAIMS						

	IND	DEP	IND	DEP	IND	DEP
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